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## BIB DATA SHEET

CONFIRMATION NO. 3586

<b>SERIAL NUMBER</b> 10/587,911	<b>FILING or 371(c) DATE</b> 04/20/2007 <b>RULE</b>	<b>CLASS</b> 112	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 18879-023US1		
<b>APPLICANTS</b> Morten Mernoe, Charlottenlund, DENMARK; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/DK05/00060 01/28/2005 <b>** FOREIGN APPLICATIONS *****</b> DENMARK PA 2004 00123 01/29/2004 DENMARK PA 2004 00428 03/17/2004 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 08/23/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/SCOTT J MEDWAY/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> DENMARK	<b>SHEETS DRAWINGS</b> 24	<b>TOTAL CLAIMS</b> 8	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> FISH & RICHARDSON P.C. PO BOX 1022 MINNEAPOLIS, MN 55440-1022 UNITED STATES						
<b>TITLE</b> Disposable Medicine Dispensing Device						
<b>FILING FEE RECEIVED</b> 965	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		